



CEMETERY AND FUNERAL BUREAU
P.O. Box 989003
West Sacramento, CA 95798-9003
 (916) 327-3219 FAX (916) 445-8147



CEMETERY SALESPERSON LICENSE APPLICATION
\$30 Application Fee

Please Print Clearly or Type

APPLICANT INFORMATION

Last Name:	First Name:	Middle:	Alias:	
Residence Address:	Number and Street	City	State	Zip Code
Residence Telephone No:	Social Security Number:	Date of Birth:		

Note: All cemetery salesperson licenses expire on June 30. Please check one of the following boxes.
 I wish my license to be: ☐ issued as soon as possible ☐ held until July 1st

BROKER INFORMATION

Name of Employing Broker:	(Enter the broker's name, not the business name)	Broker License No:		
Name of Business:				
Physical Address of Business:	Number and Street	City	State	Zip Code
Mailing Address of Business:	(If different from above)	City	State	Zip Code
Telephone Number of Broker:	Broker's Contact Person: (For questions regarding this application)			

APPLICANT – DO NOT WRITE IN THE BOXES BELOW, CONTINUE ON PAGE 2

CERTIFICATION OF THE EMPLOYING BROKER

I hereby certify under penalty of perjury under the laws of the State of California that I am a licensed Cemetery Broker. I request the Cemetery and Funeral Bureau to issue the person named in this application a license as a Cemetery Salesperson in my employ. I certify that if a license is issued I will exercise a careful supervision over the salesperson's cemetery activities while so employed.

Signature of Broker:	Print Name:	Date:
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For Bureau Use Only

Date Cashiered:	Receipt Number:	License Number Issued:
Amount Received:	ATI No./Date:	Issuance Date:

CEMETERY SALESPERSON LICENSE APPLICATION (continued)

1. Have you ever been licensed as a cemetery broker or salesperson by this or any other state? ☐ Yes ☐ No

If yes, provide license number and date licensed: _____

2. Have you previously submitted fingerprint cards or a copy of a request for Live Scan Service to the Cemetery and Funeral Bureau? ☐ Yes ☐ No

If yes, explain for what purpose, the approximate date, and Live Scan ATI number:

3. Have you ever been convicted of, or pled no contest to, a violation of any law of a foreign country, the United States, any state or local jurisdiction? ☐ Yes ☐ No

If yes, attach an explanation that includes the type of violation, the date, circumstances and location, and the complete penalty received. Also include copies of court documents, arrest records, verification of restitution received by the court, and verification of successful completion of probation.

You must include all misdemeanor and felony convictions, regardless of the age of the conviction, including those which have been set aside and/or dismissed under Penal Code section 1000 or 1203.4. (Traffic violations of \$500 or less need not be reported.)

4. Have you ever had any professional or vocational license or registration denied, suspended, revoked, placed on probation or other disciplinary action taken by this or any other governmental authority in this state or any other state? ☐ Yes ☐ No

If yes, attach an explanation that includes the license type, the action taken, by what state, and the date. Also include copies of court documents, arrest records, verification of restitution received by the court, and verification of successful completion of probation.

CERTIFICATION OF THE APPLICANT

A salesperson license entitles you to act as a cemetery salesperson for the broker named on this application at the address shown. It does not entitle you to work for any other broker or any other office of your employing broker.

I certify under penalty of perjury under the laws of the State of California that the answers given in this application are true and correct, and that if licensed I will not violate any provisions of the Cemetery Act nor misuse the privileges of the registrant.

Signature of Applicant:

Print Name:

Date:

Note: All items in this application are mandatory; none are voluntary. Failure to provide any of the requested information will result in the application being considered incomplete (incomplete applications are subject to abandonment two months from the date the applicant is notified of deficiencies). All information provided will be used to determine qualification for licensure, per the Business and Professions Code that authorizes the collection of this information. Per California Civil Code section 1798.17 (Information Practice Act), the Chief of the Cemetery and Funeral Bureau is responsible for maintaining information in this application. This information may be transferred to other governmental and enforcement agencies. Individuals have the right to review the records maintained on them by the agencies, unless the records are exempt by Section 1798.40 of the Civil Code. Requests for information may be addressed to the custodian of records: Bureau Chief, Cemetery and Funeral Bureau, 400 R Street, Suite 3080, Sacramento, CA 95814, (916) 322-7737.

Section 30 of the Business and Professions Code and Public Law 94-455 (42 U.S.C.A. 405 (c)(2)(c)) authorizes the collection of your Social Security Number (SSN). The disclosure of your SSN is mandatory. The information will be used exclusively for tax enforcement purposes and for purposes of compliance with section 11350.6 of the Welfare and Institutions Code. If you fail to disclose your SSN, you will be reported to the Franchise Tax Board, which may assess a \$100.00 penalty against you. Questions regarding this requirement must be directed to the Franchise Tax Board: So. California (800) 852-7050, No. California (800) 852-5711, or Sacramento at (916) 369-0500.



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400 R STREET, SUITE 3040
SACRAMENTO, CA 95814
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Cemetery Salesperson Application Checklist

For Applicant Use Only – Do not return this page to the Bureau

- ☐ Have you completed each item on pages 1 and 2 of your application?
- ☐ Have both you and your broker signed the application?
- ☐ Have you included a \$30.00 application fee?
- ☐ Have you submitted the original application? Photocopies are not accepted.

All applicants who have not previously submitted fingerprints to the Bureau must submit one of the following:

- ☐ Have you included your completed Request for Live Scan Service?
- ☐ Have you included a completed set (2) of fingerprint cards with a \$56.00 processing fee?

Direct all questions regarding your application to the Cemetery and Funeral Bureau, Licensing Unit at the address and telephone number listed above. Mail your application, and all requested items to:

REGULAR MAIL: P.O. Box 989003, West Sacramento, CA 95798-9003

PRIORITY MAIL: 400 R Street, Suite 3080, Sacramento, CA 95814

Important Information

Cemetery salesperson licenses are only valid to the broker and the location for which they are issued. A change of your employing broker or the location where you work requires you to submit a Transfer Application with a \$25.00 processing fee. If your license has expired, you must pay any accrued renewal fees and penalties prior to the transfer of your license. Pursuant to Business and Professions Code Section 9750, all cemetery licenses may be renewed within five years of the expiration upon payment of all accrued and unpaid renewal and regulatory fees.

Do not submit a Transfer Application for a change of residence address. If you have a change of residence address, you may notify the Bureau in writing including the following information: your name, license number, new address, previous address, date of birth, social security number, and your signature. No fee is required for a change of residence address.

Business and Professions Code Section 9710 states in pertinent part ***“Immediately upon the salesperson’s withdrawal from the employ of the broker, the broker shall return the salesperson’s license to the Bureau for cancellation.”***

BROKERS PLEASE NOTE: Do not wait until the license expires to return the license to the Bureau for cancellation.